

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | T.G. | | 6/21/01 |
| O.I.P.E. CLASSIFIER | Du | | 6/28 |
| FORMALITY REVIEW | 3M | 30884 | 7/8/01 |
| RESPONSE FORMALITY REVIEW | A.M. | 3C 580 | 11-03-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
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| 46 | ✓ |
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| 49 | ✓ |
| 50 | ✓ |

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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| Final Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy

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29/10/01
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10/10/11